

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

07/10/95

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Identification Number for that installation appears in the box The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C

EPA I.D. NUMBER -> NYD981872625

FACILITY NAME -> J & S AUTO REFINISHING LTD

MAILING ADDRESS -> 200 HENRY ST

LINDENHURST, NY 11757

INSTALLATION ADDRESS ->

200 HENRY ST LINDENHURST, NY 11757

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY **REGION II** 290 BROADWAY **NEW YORK, NEW YORK 10007-1866**

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL. **HAZARDOUS & SOLID WASTE PROGRAMS BRANCH** RCRA NOTIFICATIONS

TO: OPPEDISSANO, AL B S MGR J & S AUTO REFINISHING LTD 200 HENRY ST LINDENHURST, NY 11757

Change (owners)

Please print ot type (12 Characters per inch) in the unshaded areas only

Form Approvide/ DMB, No. 2050-0026 Extires 10-31-91

Please refer to the *Instructions* for Filing Natification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

&EPA

Notification of Regulated Waste Activity

PROPERTY Date Reserved
PROPERTY DATE OFFICIAL USE GALY)

and Recovery Act). United States Envi		ection A					
I. Installation's EPA ID Number (Mark 'X' in the appropriate		301101174	garicy				
A. First Notification B. Subsequent Notification (complete item C)		UY.	09		87		
II. Name of Installation (Include company and specific site	name)				1911	1901-	ر صان عا
JES AUTO REFINI	1541	N.G	Till	14	7)		
III. Location of Installation (Physical address not P.O. Box							
Street							
200 HENRY STREE	1						
Street (continued)		1	1				
City or Town		State	ZIP C	ode			
LINDENHURST		NY	1/	73	57	-	
County Code County Name						<u> </u>	
OUFFOLK				TT	TT	TI	\neg
IV. Installation Mailing Address (See Instructions)							
Street or P.O. Box							
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							<u> </u>
City or Town		State	ZIP Co	de	-, , .		 -
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V. Installation Contact (Person to be contacted regarding wa	aste activities a	et site)					
Name (last)	(first)						
OPPED155ANO	AL					T	
Job Title	Phone Numl	ber (area	code :	nd numl	ner)	<u> </u>	
B, S MGR.	516		21	- 15	नना	त्रा	
VI. Installation Contact Address (See Instructions)							
. Contact Address B. Street or P.O. Box							
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City or Town							
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					-		
VII. Ownership (See Instructions)							
A. Name of Installation's Legal Owner							
10HN 57ALUPP11		TI					TT
Street, P.O. Box, or Route Number							
OO HENRY STREE	77	TT	1 1			r 	T T
City or Town				ليلب	لــلــا		
	1 31	ate Z	IP Cod	e			
INDENHURST	\mathcal{N}	191	///	75	7 -		
hone Number (area code and number) B. Land Type	C. Owner Type		inge of	Owner	(Date	Change	ed)
16-321-5351 P	p	Yes i	Indicato	<u>"</u>	Month	Day	Year

		ID - For Official Use Only
VIII. Type of Regulated Waste Activity		
A. Hazardous 1. Generator (See Instructions)	s Waste Activity	B. Used Oil Fuel Activities
a. Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (220 - 2,200 lbs.) c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-8 a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	this activity; see instruction 4. Hazardous Waste Fuel a. Generator Marketing to	a. Generator Marketing to Burn b. Other Markerer c. Burner - Indicate device(s) - Type of Combustion Device 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace 2. Specification Used Oil Fuel Market (c) On-eite Burner) Mile First Oil
IX. Description of Regulated Wastes (U.	ise additional sheets if necessary)	
wastes your installation handles. (See 40 Composition of the Compositi	4. EP Toxic (Ust specific EPA hazard (D000) (Ust specific EPA hazard (Ust specific EPA	
and all attached documents, and that obtaining the information, I believe the hat there are significant penalties imprisonment. gnature	at based on my inquiry of thos hat the submitted information is for submitting false information. Name and Official Title (type or prin	amiliar with the information submitted in this se individuals immediately responsible for strue, accurate, and complete. I am aware on, including the possibility of fines and not possibility.
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. Comments		
		Section III of the booklet for addresses.)



ACKNOWLEDGEMENT OF NOTIFICATION

OF HAZARDOUS WASTE ACTIVITY

04/02/91

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->

NYD981872625

FACILITY NAME ->

QUALITY AUTO WORKS INC

MAILING ADDRESS ->

200 HENRY ST

LINDENHURST, NY 11757

INSTALLATION ADDRESS ->

200 HENRY ST LINDENHURST, NY 11757

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION II 26 FEDERAL PLAZA NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: CONRAD BOB
QUALITY AUTO WORKS INC
200 HENRY ST
LINDENHURST, NY 11757

FEB 07 '91 12:02 TO 0413040505, J7020415 FROM	WELLINGTON, LTD. T-056 P.05
Please print or type why ELITE type (12 characters per inch) in the unshaded area	Sonly Form Approved OMB No. 2060-0028. Expires 9-30-198 Only GSA No. 0246-EPA
United States Environmental Pr Washington, DC 20	rote Min Manuel Al Dentron Please refer to the Instructions to
SEPA Notification of Hazardou	一種を持たし、化土組織 7年 I this form. The information requested
For Official Use Only	IS SVASIE ACTIVITY 3010 of the Resource Conservation and Recovery Act).
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	Date Received
installation's EPA ID Number	Approved (yr. mo. day)
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installation / / / / / / / / / / / / / / / / / / /	
SAHGITY HU10 WO	RKS INC.
1). Installation Mailing Address Street	or P.O. Box
3200 HENRY STRE	
City of Town	State ZIP Code
& LINDENHURST	1/1/757
III. Location of Installation	707111
J. H. Martine Co.	Source Number
SAME	
City or Town	State ZIP Code
FSAME	
IV, Installation Contact	
Name and Title (last, first, and job title)	Phone Number (area code and number)
2 CONKAD BOB	5/6/4225496
V. Ownership A. Name of installation's Legal Owner	D Time of Ownership (arrest code
DETE MARCELIA	S. Type of Ownership (enter code)
VI. Type of Regulated Waste Activity (Mark 'X' in the app	
A. Hazardous Waste Activity	B. Used Oil Fuel Activities
☑ 1a. Generator ☑ 1b. Less than 1,000 kg/mo. ☐ 2. Transporter	6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)
3. Treater/Storer/Disposer	a. Generator Marketing to Burner
4. Underground Injection 5. Market or Burn Hazardous Waste Fuel	D. Other Marketer
(anter 'X' and mark appropriate boxes below)	□ c. Burner
a. Generator Merketing to Burner b. Other Marketer	7. Specification Used Oil Fuel Merketer (or On site Burner) Who First Claims the Oil Meets the Specification
□ c. Burner	
VII. Waste Fuel Burning: Type of Combustion Device (enterwhich hazardous waste fuel or off-specification used oil fuel is burned. S	or 'X' in all appropriate boxes to indicate type of combustion device(s) in
☐ A. Utility Soiler ☐ B. Industria	8 Boiler C. Industria: Furnace
VIII. Mode of Transportation (transporters only - enter	
	her (specify)
IX. First of Subsequent Notification	
Mark X in the coroniete box to indicate whether this is your installation desired in the coronies and your first notification, enter your installation's Electron's	ition's first notification of hazardous waste activity or a subsequent PA ID Number in the space provided below
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ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA. treatment, storage and disposal facilities must file with EPA; on all applications for a Reports that generators of hazardous waste, and owners and operators of hazardous waste of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number the installation located at the address shown in the box below to comply with Section 3010 for that installation appears in the box below. The EPA Identification Number must be This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for included on all shipping manifests for transporting hazardous wastes; on all Annual

EPA Form 8700-12B (4-80)	INSTALLATION ADDRESS		EPA I.D. NUMBER
08/01/89	LINDENHURST NY 11757	DILLINGER/GAINES COACHWORKS LTD 200 HENRY ST LINDENHURST NY	NY0981872625

Please print or type with ELITE type (12 characters per inch) in the unshaded area United States Environmental Protection Agency Washington, DC 20460 Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act). **Notification of Hazardous Waste Activity** For Official Use Only Comments C С **Date Received** Installation's EPA ID Number Approved mo. dayl Name of Installation Installation Mailing Street or P.O. Box City or Town State **ZIP Code** Location of Installation Street or Route Number City or Town **ZIP Code** V. Installation Contact Name and Title (last, first, and job title) Phone Number (area code and number) Ownership A. Name of Installation's Legal Owner B. Type of Ownership (enter code) Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.) A. Hazardous Waste Activity **B. Used Oil Fuel Activities** 🛭 1a. Generator X 1b. Less than 1,000 kg/mo. 6. Off-Specification Used Oil Fuel 2. Transporter (enter 'X' and mark appropriate boxes below) 3. Treater/Storer/Disposer a. Generator Marketing to Burner 4. Underground Injection D b. Other Marketer 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) a. Generator Marketing to Burner 7. Specification Used Oil Fuel Marketer (or On site Burner)
Who First Claims the Oil Meets the Specification b. Other Marketer C. Burner VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriete boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.) B. Industrial Boiler VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es) B. Rail X C. Highway D. Water ☐ E. Other (specify) IX. First or Subsequent Notification Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below. C. Installation's EPA ID Number A. First Notification B. Subsequent Notification (complete item C)

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NEW YORK HIS ASENCY, RELIGION 13 AND WAR WAR THE COMMENTAL

NAME CHANGE/OWNERSHIP CHANGE 2

Form Approved. OMB No. 2050-0028. Expires 9-30-88. GSA No. 0246-EPA-0T Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

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SHVRONNENTAL PROTECTION ACENCY, RECION II

United States Environmental Protection Agency Washington, DC 20460 Please refer to the *Instructions for Filing Notification* before completing this form. The information requested Notification of Hazardous Waste Activity here is required by law (Section 3010 of the Resource Conservation and Recovery Act). For Official Use Only Comments C С **Date Received** Suffolk Installation's EPA ID Number Approved Ivr. mo. 103 Name of Installation WO ll. Installation Mailing Address Street or P.O. Box City or Town **ZIP Code** III. Location of Installation Street or Route Number City or Town State ZIP Code V. Installation Contact Name and Title (last, first, and job title) Phone Number (area code and number) Ownership A. Name of Installation's Legal Owner B. Type of Ownership (enter code) Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.) A. Hazardous Waste Activity **B. Used Oil Fuel Activities** oxtimes1a. Generator SQG1b. Less than 1,000 kg/mo. 6. Off-Specification Used Oil Fuel 2. Transporter (enter 'X' and mark appropriate boxes below) 3. Treater/Storer/Disposer a. Generator Marketing to Burner 4. Underground Injection b. Other Marketer 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) C. Burner a. Generator Marketing to Burner 7. Specification Used Oil Fuel Marketer (or On site Burner) ☐ b. Other Marketer Who First Claims the Oil Meets the Specification VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.) A. Utility Boiler B. Industrial Boiler C. Industrial Furnace VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es) B. Rail C. Highway D. Water ☐ E. Other (specify) IX. First or Subsequent Notification Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below. C. Installation's EPA ID Number A. First Notification B. Subsequent Notification (complete item C)

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EPA Form 8700-12 (Rev. 11-85) Reverse